

MAYOR AND CITY COUNCIL OF LAUREL DEPARTMENT OF PARKS & RECREATION

8103 Sandy Spring Road • Laurel, Maryland 20707 • (301) 725-7800 Internet Address http://www.laurel.md.us • E-mail: parks@laurel.md.us

Dear Parents,

As part of our continuing service to the City of Laurel, pool patrons and to promote a safe swimming environment for children using the diving board and slide, the City will be administering swimming tests for children 12 years of age and under who wish to use the diving well during the summer season.

If you wish to allow your child to use the diving well and diving board/slide during the summer season, please complete the other side of this letter and have your child return it to the pool prior to his/ her testing.

If you have any questions, please do not hesitate to contact the pool office at 301-776-7419.

Thank you for your patronage, Laurel Municipal Pool Staff

TESTING INFORMATION

- Children 12 years of age and under must wear Identification Bracelets (ID bracelets) when using the diving well.
- ID bracelets will be issued to children who, under staff supervision, swim two (2) lengths of the lap pool and tread water without stopping for a predetermined amount of time.
- One reusable ID bracelet will be issued free of charge to a child upon passing the test.
- Replacement ID bracelets will cost \$2.00 whether it is lost/stolen or left at home.
- Diving privileges <u>will be revoked</u> if an ID bracelet is transferred to another individual.

Ι	have	read	the	above	$\verb"information".$	
	Pare	ent/Gu	ardi	lan Si	gnature	Date

(Please see other side)

Laurel Municipal Swimming Pool 9th and Main Streets Laurel, Maryland 20707 (301) 776-7419

Child's Name		Age					
Address		DOB					
City	State	Zip Code					
Parent/Guardian Name	Home Phone	Cell/Work Phone					
Emergency Contact (Other than Parent)	Home Phone	Cell/Work Phone					
The emergency contact will only be emergency. The emergency contact							
If the bracelet is lost/stolen or purchased for \$2.00. No exception							
I give permission for my child to Pool, subject to Pool Rules and R Laurel, Department of Parks and R operation of the Laurel Municipal	Regulations. I	will not hold the City of any person connected with the					
Signature of Parent/Guardian	-	Date (Year 1)					
Signature of Parent/Guardian	-	Date (Year 2)					
OFFICE USE ONLY							
DATE TESTED	Tested	Ву					
PLEASE CIRCLE: PASSED FAILED							